

Treating pain, holistically

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Bruce Becker, weekend warrior, was playing some serious lacrosse on the weekends.

Which was how he developed a serious case of tendinitis in his arm.

The orthopedist he visited did an MRI and suggested surgery to fix the problem. However, the doctor also acknowledged that the surgery might not fix the problem.

"I thought `I'd rather endure the pain,'" Becker, 47, of Danbury said.

But instead, Becker found his way to the Center for Pain Rehabilitation in Danbury, run by Dr, Mitchell Prywes. Through physical therapy and acupuncture -- including acupuncture with electric stimulus -- he's getting the use of his arm back.

When he started, with Prywes he had about 15 to 20 percent use of his arm, compared to when it was healthy. Now it's improved to 60 percent.

"I want to get to 75 percent, maybe 90 percent," Becker said.

Which Prywes said, is part of his philosophy on integrative medicine.

He's not promising any miracle cure. But through different therapies, through diet and exercise and the involvement of the patient in that therapy, he's seen that things can get better.

And, he said, that care comes while emphasizing the patient's overall health -- mind, body and spirit alike.

"We want to focus on health and wellness rather than disease system management," he said.

And, he said, it's an approach based in medical science.

"If I have pneumonia, I want antibiotics," he said.

Prywes has practiced in the city for 22 years -- first as the associate director of rehabilitative medicine at Danbury Hospital, then in his own practice at the center.

He's a physiatrist -- a doctor who specializes in the way muscles and connective tissue work with the skeletal system.

But he's also a medical acupuncturist. He's studied osteopathic manipulation. He has a physical

therapist on staff. And he's a fellow at the Arizona Center for Integrative Medicine, which is led by Dr, Andrew Weill, the most influential practitioner of integrative medicine in the United States.

What Prywes tries to do, whenever possible, is a low-tech approach to his patients' care. There's more doctor-patient interaction, and an emphasis on patient involvement in their own care.

Prywes also stresses diet and stress reduction in his practice -- things like yoga, swimming and tai chi are part of his treatment regimen.

And he's also learned, over time, that techniques like acupuncture -- viewed skeptically by many steeped in the traditions of Western medicine -- has its value.

"He's a magician," said Kirk Dugan, 42 of Brookfield, who goes to Prywes for help with the myofascial pain he's suffered from in his neck, shoulder and back after an auto accident a few years ago. He has experienced the relief acupuncture can give.

"He's been my life-saver," Dugan said.

Prywes said Dugan, like many of his patients, came to the center only after he'd tried other doctors who were unable to help.

That means he has to spend a lot of time simply trying to get his patients to where the pain is in a manageable state.

"I'm happy to serve as a first line physician," he said. That doesn't happen often, he admitted.

Having seen the benefits of his approach, Prywes is now working to train the next generation of doctors in the techniques and philosophy of integrative medicine.

He's now teaching at the University of Connecticut School of Health in Farmington, which has incorporated integrative medicine into its family practice residency program. It's one of only eight medical centers to do so in the United States

This approach, Prywes said, is increasingly important in a country that's only beginning to understand what an expensive health care system it's devised over the years.

By emphasizing a low-tech, holistic approach that focuses on disease prevention -- rather than just rushing to the latest technology or the newest pharmaceutical -- the whole system might save money.

And with the obesity epidemic now making children in the United States seriously overweight, a philosophy that integrates diet and exercise into standard medical practice might prove life-saving.

"If we're seeing children with Type II diabetes at the age of 7 or 8, that means we're going to be treating people for heart attacks at the age of 25," he said.

It's also an approach that stresses a deeper relationship between doctor and patient -- something the current medical system is doing less of.

"I think I'm treating my patients the way I'd like to be treated myself," Prywes said.

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